

File Original and First Copy with
Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

ENTERED

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No. W043487

UNIQUE WELL I.D. #

Water Right Permit No.

(1) OWNER: Name Ledgebrook Beach Water Ass Address 31-2E-30G

(2) LOCATION OF WELL: County Island SW 1/4 NE 1/4 Sec 30 T 31 N. R 2E W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) Pinecrest - North end of Rd

(3) PROPOSED USE: ☐ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☒ Other ☐
☐ DeWater

(4) TYPE OF WORK: Owner's number of well (if more than one) #3

Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well _____ inches.
Drilled _____ feet. Depth of completed well _____ ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 8" Diam. from 0 ft. to 281 ft.
Welded ☒ 6" Diam. from +3 ft. to 3 ft.
Liner installed ☐ Threaded ☐ Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____
SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name HSSC
Type Stainless Model No. 304
Diam. 6 Slot size 10 from 310 ft. to 320 ft.
Diam. 18+16 Slot size 18+16 from 324 ft. to 334 ft.

Gravel packed: Yes ☐ No ☒ Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 44' ft.

Material used in seal Bentonite

Did any strata contain unusable water? Yes ☐ No ☒

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

(7) PUMP: Manufacturer's Name Red Jacket - Test
Type: Sub H.P. 1/2

(8) WATER LEVELS: Land-surface elevation above mean sea level 295-300 ft.

Static level 260 ft. below top of well Date 11/1/96

Artesian pressure _____ lbs. per square inch Date _____

Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☒ No ☐ If yes, by whom? Driller

Yield: 65+ gal./min. with 29 ft. drawdown after 4+ hrs.

" " " "

" " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

0 291 60 sec 270 90 sec 260

Date of test _____

Ballot test _____ gal./min. with _____ ft. drawdown after _____ hrs.

Alttest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

| MATERIAL | FROM | TO |
|--------------------------------------|---------|---------|
| Brown Topsoil / Gravel | 0 | 1 |
| Brown SAND | 1 | 43 |
| " HARD PAN | 43 | 48 |
| " SAND | 48 | 53 |
| " Sandy SAND | 53 | 74 |
| Water - SAND + Gravel | 74 | 90 |
| Grey Clay + Gravel | 90 | 95 |
| " Clay | 95 | 123 |
| Grey HARD HARD PAN + ROCKS | 123 | 195 |
| Brown SAND + GRAVEL | 195 | 221 |
| Grey + Brown SAND | 221 | 225 |
| HARD DRK / Brown SAND + Gravel | 225 | 234 |
| " " Grey HARD PAN + ROCK | 234 | 280 |
| Layers - Grey Siltstone, shale, SAND | 280 | 305 |
| " w/ water - | | |
| clay Water SAND - Fine Grey | 305 | 316 |
| " " Coarser - Grey | 316 | 319 1/2 |
| HARD Grey Clay + SAND | 319 1/2 | 322 |
| clay Med SAND - Grey | 322 | 327 |
| " " " some Gravel | 327 | 334 |
| Grey CLAY + Shale | 334 | 335 |

RECEIVED

NOV 25 1996

DEPT. OF ECOLOGY

Work Started 9-16 1996 Completed 11-6 1996

WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME Well Done Driller (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address 440 Hill Valley Dr

(Signed) DR F. K. W. License No. 1304

(WELL DRILLER)

Contractor's Registration No. 1051781K Date 9/6

(USE ADDITIONAL SHEETS IF NECESSARY)



Well Tagging Form

Unique Well Tag No: 39538 AGA913

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name: EDGWOOD IS W DIST Last Name: _____

Street Address: _____

City: _____ State: _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address: END OF PINECREST LN

City: _____ County: _____

T. _____ N. R. _____ W.M. Sec. _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available:

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

3" CASING INSIDE CONCRETE BLOCK HOUSE - NO PAINT WHITE
202 / TRIM W/ SLOPED ROOF WHICH IS BLUE. P.H. IS GREY / WHITE TRIM
1 / GABLED ROOF (~25' x 20' x 20') CONCRETE RES. IN BACK

Location of Well Identification Tag:

CASING

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1:24,000 (1"=2,000')

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION _____

| | | |
|---|---|---|
| C | B | A |
| F | G | H |
| L | K | J |
| P | Q | R |

Comments:

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right # _____

Date Issued _____

One: Application

Permit

Certificate

Claim

Exempt